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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		No.	98730-000025/US					
First Inventor Chi		Chie	en-Te WU					
			RCUIT FOR OPTICAL RECORD MEDIUM B DEVICE AND METHOD THEREOF					

(Only for n	new nonprovisiona	al applications unde	er 37 C.F.R. 1.53(b))	Express Mail Label No.	N/A				
		ICATION EL	EMENTS application contents.	ADDRESS TO: Commissioner for Patents Box Patent Application P.O. Box 1450 Alexandria, VA 22313-1450					
2.	Submit an original ar Applicant claims See 37 CFR 1.2 Specification preferred arrange Descriptive title o Cross Reference: Statement Regar Reference to seq or a computer pro Background of th Brief Summary of	[7] ment set forth belof f the Invention s to Related Applic ding Fed sponsore uence listing, a tab ogram listing apper e Invention f the Invention of the Drawings (i	tus. Total Pages 11. sations d R & D ole, adding	Computer 8. Nucleotide and (if applicable, a.	c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s))				
4. \(\) D 5. Oath or I a. \(\) b. \(\) i. \(\) 6. \(\) App 18. If a CON or in an App	Abstract of the Divawing(s) (35 L) Declaration Newly execute Copy from a property of the Copy from t	J.S.C.113) [7 ed (original or co rior application (: ttion/divisional w OF INVENTOF nt attached deletin ior application, see 1.33(b). heet. See 37 Cl CATION, check ap eet under 37 CF	37 CFR 1.63 (d)) iith Box 18 completed) R(S) g inventor(s) e 37 CFR FR 1.76 oppropriate box, and supp	11. English 12. Information Statemer 13. Prelimin 14. Return Formula 15. Certified (if foreign) 16. Request (b)(2)(Bor its equal of the requisite information of the requisite info	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503)				
For CONTIN under Box 5	olication information	SIONAL APPS on a part of the disc	ly: The entire disclosure	Go of the prior application ying or divisional appli	roup / Art Unit: , from which an cation and is her	oath or declaration is suppli eby incorporated by referen			
			17. CORRESPO	NDENCE ADDRESS					
☑ Custon	ner Number or Ba	r Code Label	• • • • • • • • • • • • • • • • • • • •	593 sitach bar code label here		Correspondence address belo	w		
Name	Harness, Dick	key & Pierce, P.L	C.						
Address	P.O. Box 8910	0							
City	Reston		State	VA	Zip Code	20195			
Country	United States	of America	Telephone	703-668-8000	Fax	703-668-8200			
Name (Pri	int/Type)	John A. Caste	Hano // //	Registration No. (Att	orney/Agent)	35,094			
Signature		1	11111		Date	August 25, 2003			

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PTO/SB/17 (01-03)
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Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(2)	70

Complete if Known							
Application Number	New Application	_					
Filing Date	August 25,2003						
First Named Inventor	Chien-Te WU	_					
Examiner Name	Unassigned						
Group / Art Unit	Unassigned						
Attorney Docket No.	98730-000025/US						

METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued)					
					3. ADI	DITIONA	L FEES				
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order ☐ Deposit Account:						Large	Entity	Small I	Entity		
Deposit						Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account	08-0750					1051	130	2051	65	Surcharge - late filing fee or oath	
Number						1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit						1053	130	1053	130	Non-English specification	
Account Hamess, Dickey & Pierce, P.L.C.					1812	2,520	1812	2,520	For filing a request for reexamination		
Name The Commission	oner is autho		to: (check a	II that app		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
☐ Charge fee(s ☐ Charge any a	i) indicated be additional fee	elow (s) dur	Credit an ring the pend	y overpayr dency of th	ments is application	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
☐ Charge fee(s				ie filing fe	e	1251	110	2251	55	Extension for reply within first month	
to the above-ide			ount.			1252	410	2252	205	Extension for reply within second month	
1. BASIC F	ILING FEE					1253	930	2253	465	Extension for reply within third month	
Large Entity	Small Entity	_				1254	1,450	2254	725	Extension for reply within fourth month	
Fee Fee Code (\$)	Fee Fee Fee <u>Fee Description</u> (\$) Code (\$) Fee Paid						1,970	2255	985	Extension for reply within fifth month	
1001 750	,	e (\$) Fee Paid 375 Utility filing fee 750					320	2401	160	Notice of Appeal	
1001 730	2001 375	· · · · · · · · · · · · · · · · · · ·					320	2402	160	Filling a brief in support of an appeal	
1002 530	2002 160	-	lant filing fee	•	 	1403	280	2403	140	Request for oral hearing	
1004 750	2004 375	5 R	Reissue filing f			1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160	2005 80	P	rovisional filli	ng fee		1452	110	2452	55	Petition to revive – unavoidable	
Į	SUBTO	OTAL	/1 \		(\$) 750	1453	1,300	2453	650	Petition to revive - unintentional	
Ĺ			···		<u> </u>	1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CLAI	M FEES			_		1502	470	2502	235	Design issue fee	
ļ				Fee from	Fee	1503	630	2503	315	Plant issue fee	
Total Claims 9	-20**	_	Claims 0 X	below	Paid = 0	1460	130	1460	130	Petitions to the Commissioner	
Independent	==	` =			;	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Claims 1	-3 **	= (0 X		= 0	1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent Large Entity	ي Small E	ntity	Х		= 0	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Desci	ription		1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	,
1202 18	2202	9	Claims in o	excess of 2	0	1810	750	2810	375	For each additional invention to be	\vdash
1201 84	2201	42	Independe	ent claims in	n excess of 3	1				examined (37 CFR § 1.129(b))	
1203 280	2203	140			aim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)	
1204 84	2204	** Paissus independent claims over				1802	900	1802	900	Request for expedited examination	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent						Other fo	e (specif	5.A		of a design application	
		SUE	BTOTAL (2)	(\$) 0							
**or number previously paid, if greater; For Reissues, see above						*Reduc	ced by Ba	asic Filinç	j Fee Pa	aid SUBTOTAL (3) (\$) 40	

SUBMITTED BY				Co	nplete (if applicable)	
Name (Print/Type)	John A. Castellano	Fingistration flif Attonoy/Agent)	35,094	Telephone	703-668-8000	
Signature		1 Cliv		Date	August 25, 2003	

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